

Request for Cancellation of Certificate

File the original with:

Public Service Commission of South Carolina
 Clerk's Office
 Motor Carrier Matters
 P.O. Box 11649
 Columbia, S.C. 29211
 (803) 896-5100
 FAX (803) 896-5199

Mail or fax a copy to:

Office of Regulatory Staff
 Transportation Department
 1401 Main Street, Suite 900
 Columbia, S.C. 29201
 (803) 737-0578
 FAX (803) 737-0815

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APR -5 2013

**ORS
T.T.W./W**

DATE:

4-5-2013Docket # 2009-81-T

Please consider this a request to cancel my:



Class C Taxi Certificate



Class A Restricted Certificate



Class C Charter Certificate



Class C Charter Bus Certificate



Non-Emergency Certificate



Class E Household Goods Certificate



Class E Hazardous Wastes Certificate

My Certificate Number is

8105

Ruthene Ham McAllister DBA
 (Name of Company)

(If applicable)

4223 Stage Coach Rd

(Street Address)

(Mailing Address if different from Street Address)

Effingham, SC 29541

(City, State, Zip Code)

(City, State, Zip Code)

843-617-6810

(Telephone Number)

Ruthene H. McAllister
 (Signature)

Owner

(Title) Owner, President, etc.

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APR 05 2013

REG
CLERK'S OFFICE